

AMENDED IN SENATE JULY 15, 2010

AMENDED IN SENATE JUNE 16, 2010

AMENDED IN ASSEMBLY APRIL 22, 2010

AMENDED IN ASSEMBLY APRIL 8, 2010

CALIFORNIA LEGISLATURE—2009–10 REGULAR SESSION

## ASSEMBLY BILL

**No. 2345**

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**Introduced by Assembly Member De La Torre**

February 19, 2010

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An act to add Section 1367.001 to the Health and Safety Code, and to add Section 10112.1 to the Insurance Code, relating to health care coverage.

### LEGISLATIVE COUNSEL'S DIGEST

AB 2345, as amended, De La Torre. Health care coverage: ~~federal health care reform~~. *preventive services*.

Existing law, the federal Patient Protection and Affordable Care Act (*PPACA*), enacts various health care coverage market reforms. With respect to plan years beginning on and after September 23, 2010, the act requires health insurance issuers to provide coverage, and not impose cost-sharing requirements, for certain preventive services.

Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care and makes a willful violation of that act a crime. Existing law also provides for the regulation of health insurers by the Department of Insurance.

This bill would require health care service plan contracts and health insurance policies issued, amended, renewed, or delivered on or after

September 23, 2010, to provide coverage, and not impose cost-sharing requirements, for certain preventive services. Because a willful violation of this requirement by a health care service plan would be a crime, the bill would impose a state-mandated local program.

The bill would also state the intent of the Legislature to enact legislation that would ~~implement other provisions of the federal Patient Protection and Affordable Care Act, including, among other things, requiring plans and insurers to provide an internal claims and appeals process that complies with the federal act and requiring plans and insurers to comply with certain patient protections specified in the federal act~~ *require the Department of Managed Health Care and the Department of Insurance to post a link on their Internet Web sites to the Internet Web site of the federal Department of Health and Human Services where consumers may easily obtain information about affordable and comprehensive health care coverage options under PPACA.*

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: yes.

*The people of the State of California do enact as follows:*

- 1 SECTION 1. Section 1367.001 is added to the Health and
- 2 Safety Code, to read:
- 3 1367.001. (a) (1) Subject to the minimum interval established
- 4 by the United States Secretary of Health and Human Services
- 5 pursuant to subsection (b) of Section 2713 of the federal Public
- 6 Health Service Act, as added by Section 1001 of the federal Patient
- 7 Protection and Affordable Care Act (Public Law 111-148), a group
- 8 or individual health care service plan contract that is issued,
- 9 amended, renewed, or delivered on or after September 23, 2010,
- 10 shall, at a minimum, provide coverage for, and shall not impose
- 11 any cost-sharing requirements for, all of the following:
- 12 (A) Evidence-based items or services that have in effect a rating
- 13 of "A" or "B" in the current recommendations of the United States
- 14 Preventive Services Task Force.

1 (B) Immunizations that have in effect a recommendation from  
2 the Advisory Committee on Immunization Practices of the federal  
3 Centers for Disease Control and Prevention with respect to the  
4 individual involved.

5 (C) With respect to infants, children, and adolescents,  
6 evidence-informed preventive care and screenings provided for in  
7 the comprehensive guidelines supported by the federal Health  
8 Resources and Services Administration.

9 (D) With respect to women, any additional preventive care and  
10 screenings not described in subparagraph (A) as provided for in  
11 the comprehensive guidelines supported by the federal Health  
12 Resources and Services Administration.

13 (2) For purposes of this subdivision, the current  
14 recommendations of the United States Preventive Services Task  
15 Force regarding breast cancer screening, mammography, and  
16 prevention shall be considered the most current, other than  
17 recommendations issued by the task force in November of 2009,  
18 or within 30 days of that month.

19 (3) Nothing in this subdivision shall be construed to prohibit a  
20 plan from providing coverage for services in addition to those  
21 recommended by the United States Preventive Services Task Force  
22 or to deny coverage for services that are not recommended by the  
23 task force.

24 (b) This section shall not apply to Medicare supplement ~~plans~~  
25 *plan contracts* or to coverage offered by specialized health care  
26 service plans including, but not limited to, ambulance, dental,  
27 vision, behavioral health, chiropractic, and naturopathic.

28 SEC. 2. Section 10112.1 is added to the Insurance Code, to  
29 read:

30 10112.1. (a) (1) Subject to the minimum interval established  
31 by the United States Secretary of Health and Human Services  
32 pursuant to subsection (b) of Section 2713 of the federal Public  
33 Health Service Act, as added by Section 1001 of the federal Patient  
34 Protection and Affordable Care Act (Public Law 111-148), a group  
35 or individual health insurance policy that is issued, amended,  
36 renewed, or delivered on or after September 23, 2010, shall, at a  
37 minimum, provide coverage for, and shall not impose any  
38 cost-sharing requirements for, all of the following:

1 (A) Evidence-based items or services that have in effect a rating  
2 of “A” or “B” in the current recommendations of the United States  
3 Preventive Services Task Force.

4 (B) Immunizations that have in effect a recommendation from  
5 the Advisory Committee on Immunization Practices of the federal  
6 Centers for Disease Control and Prevention with respect to the  
7 individual involved.

8 (C) With respect to infants, children, and adolescents,  
9 evidence-informed preventive care and screenings provided for in  
10 the comprehensive guidelines supported by the federal Health  
11 Resources and Services Administration.

12 (D) With respect to women, any additional preventive care and  
13 screenings not described in subparagraph (A) as provided for in  
14 the comprehensive guidelines supported by the federal Health  
15 Resources and Services Administration.

16 (2) For purposes of this subdivision, the current  
17 recommendations of the United States Preventive Services Task  
18 Force regarding breast cancer screening, mammography, and  
19 prevention shall be considered the most current, other than  
20 recommendations issued by the task force in November of 2009,  
21 or within 30 days of that month.

22 (3) Nothing in this subdivision shall be construed to prohibit a  
23 health insurer from providing coverage for services in addition to  
24 those recommended by the United States Preventive Services Task  
25 Force or to deny coverage for services that are not recommended  
26 by the task force.

27 (b) This section shall not apply to specialized health insurance  
28 policies, Medicare supplement policies, CHAMPUS-supplement  
29 insurance policies, TRICARE supplement insurance policies,  
30 accident-only insurance policies, or insurance policies excluded  
31 from the definition of “health insurance” under subdivision (b) of  
32 Section 106.

33 ~~SEC. 3. It is the intent of the Legislature to enact legislation~~  
34 ~~that would do all of the following:~~

35 ~~(a) Prohibit group health plans, other than self-insured plans,~~  
36 ~~from discriminating in favor of highly compensated individuals~~  
37 ~~as to eligibility to participate in the plan and benefits included in~~  
38 ~~the plan in a manner consistent with Section 2716 of the federal~~  
39 ~~Public Health Service Act (42 U.S.C. Sec. 300gg-16), as added~~

1 by Section 1001 of, and amended by Section 10101 of, the federal  
2 Patient Protection and Affordable Care Act (Public Law 111-148).

3 ~~(b) Require health care service plans and health insurers to~~  
4 ~~provide an internal claims and appeals process that complies with~~  
5 ~~Section 2719 of the federal Public Health Service Act (42 U.S.C.~~  
6 ~~Sec. 300gg-19), as added by Section 1001 of, and amended by~~  
7 ~~Section 10101 of, the federal Patient Protection and Affordable~~  
8 ~~Care Act (Public Law 111-148).~~

9 ~~(c) Require health care service plans and health insurers to~~  
10 ~~comply with the patient protections set forth in Section 2719A of~~  
11 ~~the federal Public Health Service Act (42 U.S.C. Sec. 300gg-19a),~~  
12 ~~as added by Section 10101 of the federal Patient Protection and~~  
13 ~~Affordable Care Act (Public Law 111-148).~~

14 ~~(d) Require the Department of Managed Health Care and the~~  
15 *SEC. 3. It is the intent of the Legislature to enact legislation*  
16 *that would require the Department of Managed Health Care and*  
17 *the Department of Insurance to post a link on their respective*  
18 *Internet Web sites to the Internet Web site of the federal*  
19 *Department of Health and Human Services where consumers may*  
20 *easily obtain information about affordable and comprehensive*  
21 *health care coverage options under the federal Patient Protection*  
22 *and Affordable Care Act (Public Law 111-148).*

23 SEC. 4. No reimbursement is required by this act pursuant to  
24 Section 6 of Article XIII B of the California Constitution because  
25 the only costs that may be incurred by a local agency or school  
26 district will be incurred because this act creates a new crime or  
27 infraction, eliminates a crime or infraction, or changes the penalty  
28 for a crime or infraction, within the meaning of Section 17556 of  
29 the Government Code, or changes the definition of a crime within  
30 the meaning of Section 6 of Article XIII B of the California  
31 Constitution.

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34 CORRECTIONS:

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